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U.S. Department of Homeland Security  
U.S. Citizenship and Immigration Services  
Administrative Appeals Office (AAO)  
20 Massachusetts Ave., N.W., MS 2090  
Washington, DC 20529-2090



U.S. Citizenship  
and Immigration  
Services

B5

DATE: JUN 15 2012 OFFICE: TEXAS SERVICE CENTER

IN RE:

PETITION: Immigrant Petition for Alien Worker as a Member of the Professions Holding an Advanced Degree or an Alien of Exceptional Ability Pursuant to Section 203(b)(2) of the Immigration and Nationality Act, 8 U.S.C. § 1153(b)(2)

ON BEHALF OF PETITIONER:

INSTRUCTIONS:

Enclosed please find the decision of the Administrative Appeals Office in your case. All of the documents related to this matter have been returned to the office that originally decided your case. Please be advised that any further inquiry that you might have concerning your case must be made to that office.

If you believe the AAO inappropriately applied the law in reaching its decision, or you have additional information that you wish to have considered, you may file a motion to reconsider or a motion to reopen with the field office or service center that originally decided your case by filing a Form I-290B, Notice of Appeal or Motion, with a fee of \$630. The specific requirements for filing such a motion can be found at 8 C.F.R. § 103.5. **Do not file any motion directly with the AAO.** Please be aware that 8 C.F.R. § 103.5(a)(1)(i) requires any motion to be filed within 30 days of the decision that the motion seeks to reconsider or reopen.

Thank you,

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Perry Rhew

Chief, Administrative Appeals Office

**DISCUSSION:** The Director, Texas Service Center, denied the employment-based immigrant visa petition. The matter is now before the Administrative Appeals Office (AAO) on appeal. The AAO will dismiss the appeal.

The petitioner seeks classification pursuant to section 203(b)(2) of the Immigration and Nationality Act (the Act), 8 U.S.C. § 1153(b)(2), as a member of the professions holding an advanced degree. The petitioner seeks employment as a public health quality improvement manager. The petitioner asserts that an exemption from the requirement of a job offer, and thus of a labor certification, is in the national interest of the United States. The director found that the petitioner qualifies for classification as a member of the professions holding an advanced degree, but that the petitioner has not established that an exemption from the requirement of a job offer would be in the national interest of the United States.

On appeal, the petitioner submits a brief from counsel.

Section 203(b) of the Act states, in pertinent part:

(2) Aliens Who Are Members of the Professions Holding Advanced Degrees or Aliens of Exceptional Ability. –

(A) In General. – Visas shall be made available . . . to qualified immigrants who are members of the professions holding advanced degrees or their equivalent or who because of their exceptional ability in the sciences, arts, or business, will substantially benefit prospectively the national economy, cultural or educational interests, or welfare of the United States, and whose services in the sciences, arts, professions, or business are sought by an employer in the United States.

(B) Waiver of Job Offer –

(i) . . . the Attorney General may, when the Attorney General deems it to be in the national interest, waive the requirements of subparagraph (A) that an alien's services in the sciences, arts, professions, or business be sought by an employer in the United States.

The director found that the petitioner qualifies as a member of the professions holding an advanced degree (although the AAO will revisit this finding below). The director denied the petition solely on the issue of whether the petitioner has established that a waiver of the job offer requirement, and thus a labor certification, is in the national interest.

Neither the statute nor the pertinent regulations define the term “national interest.” Additionally, Congress did not provide a specific definition of “in the national interest.” The Committee on the Judiciary merely noted in its report to the Senate that the committee had “focused on national interest by increasing the number and proportion of visas for immigrants who would benefit the United States economically and otherwise. . . .” S. Rep. No. 55, 101st Cong., 1st Sess., 11 (1989).

Supplementary information to regulations implementing the Immigration Act of 1990 (IMMACT), published at 56 Fed. Reg. 60897, 60900 (November 29, 1991), states:

The Service [now U.S. Citizenship and Immigration Services (USCIS)] believes it appropriate to leave the application of this test as flexible as possible, although clearly an alien seeking to meet the [national interest] standard must make a showing significantly above that necessary to prove the “prospective national benefit” [required of aliens seeking to qualify as “exceptional.”] The burden will rest with the alien to establish that exemption from, or waiver of, the job offer will be in the national interest. Each case is to be judged on its own merits.

*Matter of New York State Dept. of Transportation (NYSDOT)*, 22 I&N Dec. 215 (Act. Assoc. Comm’r 1998), has set forth several factors which must be considered when evaluating a request for a national interest waiver. First, the petitioner must show that the alien seeks employment in an area of substantial intrinsic merit. Next, the petitioner must show that the proposed benefit will be national in scope. Finally, the petitioner seeking the waiver must establish that the alien will serve the national interest to a substantially greater degree than would an available U.S. worker having the same minimum qualifications.

While the national interest waiver hinges on prospective national benefit, it clearly must be established that the alien’s past record justifies projections of future benefit to the national interest. The petitioner’s subjective assurance that the alien will, in the future, serve the national interest cannot suffice to establish prospective national benefit. The inclusion of the term “prospective” is used here to require future contributions by the alien, rather than to facilitate the entry of an alien with no demonstrable prior achievements, and whose benefit to the national interest would thus be entirely speculative.

The AAO also notes that the regulation at 8 C.F.R. § 204.5(k)(2) defines “exceptional ability” as “a degree of expertise significantly above that ordinarily encountered” in a given area of endeavor. By statute, aliens of exceptional ability are generally subject to the job offer/labor certification requirement; they are not exempt by virtue of their exceptional ability. Therefore, whether a given alien seeks classification as an alien of exceptional ability, or as a member of the professions holding an advanced degree, that alien cannot qualify for a waiver just by demonstrating a degree of expertise significantly above that ordinarily encountered in his or her field of expertise.

The petitioner filed the Form I-140 petition on October 7, 2010. In an accompanying statement, counsel stated that the petitioner “is a national[ly]-recognized Health Quality Improvement professional” whose “work at Catholic Charities Spanish Center has been showcased across the United States as a model for quality improvement at healthcare facilities.” Counsel discussed the petitioner’s employment history:

The Pan American Health Organization (PAHO) is an international public health agency with over 100 years of experience. . . .

During her tenure with PAHO from 2006 to 2007, [the petitioner] designed programs and protocols to improve the effectiveness of emergency operations in disaster areas. . . . She also developed a methodology to evaluate safe hospital investment for new hospitals in the Americas. **PAHO has published that methodology as a guide for evaluators under the title “Hospital Safety Index.”** . . .

A copy of the *Hospital Safety Index Guide for Evaluators* identifies the petitioner as one of six “[m]ain contributors” to the project. It is clear from review of the *Guide* that the document is not a general guide to hospital management, but rather a disaster preparedness manual for the purpose of “[m]aking all health facilities safe in the event of disasters.” Neither the petitioner nor counsel explained how this work is directly relevant to her intended future work of improving the overall quality of health care.

Regarding the petitioner’s later employment, counsel stated:

In 2009 [the petitioner] joined [REDACTED] as its first Health Quality Improvement Manager. She designed and implemented a new model for patient care that includes an institution-wide standardized medical record management program, active communication between all departments, and improved responsiveness to patients. As a result of the structure [the petitioner] set in place, this organization reduced the time a patient must wait to receive medical care from 4 hours in 2007 to 2 hours in 2008. Moreover, the cost of providing service to a patient was also reduced by 28 percent during the same period. From 2008 to 2009 the number of patients CCSC served increased by 36 percent. . . . CCSC’s success has been showcased around the country as a model of quality in healthcare, and [the petitioner’s] peers have recognized her critical role in CCSC’s success.

The record indicates that the name of the petitioner’s second employer is [REDACTED], or SCC. [REDACTED] executive director of SCC, cited the same statistics that counsel quoted above and stated:

In September 2007, SCC embarked upon a Health Quality Improvement (QI) Project . . . led by [the petitioner] as Quality improvement Manager, whose experience, knowledge, and leadership facilitated a culture of quality across the health clinics. [The petitioner], during the last three years, developed a quality improvement program committed to high-quality care and to utilizing best practices in healthcare delivery as key elements in reducing health disparities; and to assure that SCC has organizational systems that support open communication and continuous learning and improvement throughout everything SCC does. . . .

[The petitioner’s] experience and knowledge moved SCC to a new level of recognition in quality improvement efforts. In 2008, after the first year of starting the

program, [the petitioner] and our team were recognized by the Institute of Health Care Improvement as one of the twenty community healthcare centers in achieving major breakthroughs in quality and innovation throughout the country. [The petitioner's] work and innovative methods and activities were shared with a number of other community health care organization[s] and hospitals across the United States, through different venues like community conferences, conference call[s] and one-to-one interactions with representatives of those clinics pursuing similar goals and interested in cultural change.

During the first year, [the petitioner's] work was recognized as well by Primary Care Coalition of Montgomery County for being the only clinic, among the local community participant[s], not only in achieving major quality impacts in clinical services, also in ending-up the first year with a strong and sustainable quality improvement program. The same happened . . . in the first year that SCC participated in Quality Transformation Series of DC Primary Care Association.

Beyond the petitioner's employment history, counsel also emphasized the petitioner's service on the Board of Examiners for the Department of Commerce's Malcolm Baldrige National Quality Award in 2009 and 2010, as well as her work on the steering committee of the Latino Health Initiative of the Montgomery County (Maryland) Department of Health.

The petitioner submitted a copy of a certificate confirming her appointment as an "Examiner on the 2010 Board of Examiners of the Baldrige National Quality Program," but she submitted nothing to show the requirements for admission to that board or to establish the exact nature of her responsibilities on the board. Counsel asserted that the board has over 300 members each year. The petitioner submitted a copy of the "Become an Examiner" page from the Department of Commerce's web site at <http://www.nist.gov/baldrige/examiners/index.cfm>, but the submitted page did not specify the requirements to become an examiner. The page did, however, show that the Department does not seek out and nominate examiners. Instead, the page has a link for the "Examiner Application," and invites readers to "apply to serve as a Baldrige Examiner."

The petitioner submitted a copy of a "Certificate of Appreciation" from the Department of Commerce, thanking the petitioner for her "outstanding service to the Nation as a member of the 2009 Malcolm Baldrige National Quality Award Board of Examiners." Counsel noted the use of the term "outstanding," but the record does not show that the Department of Commerce singled the petitioner out in this regard. Rather, it appears that the wording is part of a standard certificate issued to every member of the board of examiners.

Counsel asserted that the petitioner qualifies for the national interest waiver because of her potential to improve "the suboptimal quality of health care quality [sic] in America."

The alien . . . must have established, in some capacity, the ability to serve the national interest to a substantially greater extent than the majority of his or her colleagues.

The Service here does not seek a quantified threshold of experience or education, but rather a past history of demonstrable achievement with some degree of influence on the field as a whole. . . . In all cases the petitioner must demonstrate specific prior achievements which establish the alien's ability to benefit the national interest.

*NYSDOT*, 22 I&N Dec. 219 n.6. To qualify for the waiver, the petitioner cannot simply speculate that her work could eventually become a "model" for others to emulate. She must establish that such implementation has already begun outside of the specific institutions where she has worked.

The petitioner submitted materials showing that she participated in various professional gatherings, offering presentations while employed by PAHO and SCC. The presentation materials do not, as counsel claimed, show that the petitioner's work is a nationally-emulated model.

Counsel claimed two instances of "[c]itations of [the petitioner's] work by other professionals." Neither of the two claimed citations established that the petitioner had had a significant impact on community health care beyond SCC. One citation appeared in a master's thesis submitted to George Washington University in 2009. The title of the thesis is "Community Health Care Service Awareness and Use Among the Washington Metropolitan Area Latino Population." The submitted portions of the thesis mention the petitioner only as the source of statistics concerning the wait times for various services.

The other claimed instance of citation appears in an article from what counsel identified as the *Primary Care Coalition News Bulletin* (although no publication title appears on the article itself). The focus of the one-page article is a "learning collaborative" in which SCC was one of 27 participating entities. The article mentions the petitioner only once, quoting her as saying that SCC "needed to switch from *charity care* (giving out of love) to *professional care* (giving out of love with access and efficiency)" (emphasis in original).

Several additional witness letters accompanied the petition. Less than half of the letters are signed, with the rest bearing electronically reproduced signatures or the witnesses' names typed in fonts that mimic handwriting. All but two of the witnesses work in the District of Columbia or in neighboring Montgomery County, Maryland. The two exceptions (both with typed "signatures") are [REDACTED], assistant professor of healthcare administration at Gardner-Webb University, Boiling Springs, North Carolina, and [REDACTED], principal of Hamilton Consulting, LLC, based in Michigan. Both of those witnesses have worked with the petitioner, and both letters included typed names instead of signatures.

[REDACTED], with the petitioner a fellow examiner for the Baldrige Quality Award, stated that the petitioner's "research and publications are used nationally by university programs as teaching resources," but the record contains no evidence to support that claim. Going on record without supporting documentary evidence is not sufficient for purposes of meeting the burden of proof in these proceedings. *Matter of Soffici*, 22 I&N Dec. 158, 165 (Comm'r 1998) (citing *Matter of Treasure Craft of California*, 14 I&N Dec. 190 (Reg'l Comm'r 1972)).

██████████ a consultant “with the DC Primary Care Association’s Quality Transformation Series [with] which [the petitioner] is involved,” claimed that the petitioner’s “incorporation of improved preventive and chronic care services” “has been replicated across the U.S.” Like ██████████ provided no evidence that the petitioner has had a significant influence on community health care outside of her own employers.

In separate letters, ██████████ executive director of Care For Your Health, Inc., and Barbara Hoffman Eldridge, quality improvement manager of the Primary Care Coalition of Montgomery County, both claimed that the petitioner’s appointment as a Baldrige Award examiner is a form of national recognition for her work, but the record contains nothing from the Department of Commerce to verify this claim.

██████████, director of communications for the Office of Minority Health Resource Center, U.S. Department of Health and Human Services, described herself as a longtime collaborator with the petitioner. She praised the petitioner’s work with SCC and the Latino Health Initiative, but did not indicate that the petitioner’s work has had wider scope.

██████████ medical director of SCC, stated: “Catholic Charities, a national leader in the area of non-profit healthcare has implemented [the petitioner’s] new methodology.” The record contains no national-level documentation from Catholic Charities to confirm implementation outside of greater Washington, D.C.

██████████ who worked with the petitioner “at Catholic Charities for approximately six months,” contended that the petitioner’s work at SCC “has been recognized and presented as a leading case study at quality improvement conferences and workshops locally and nationally.” This claim, like similar claims in the record, fails to establish that other organizations have in fact used the petitioner’s work and, as a result, improved the efficiency or quality of patient care.

██████████, manager of Montgomery County’s Latino Health Initiative, praised the petitioner’s local work but identified no specific product of the petitioner’s work that has been implemented beyond the local level.

██████████, who claimed a background in public administration and economics but no particular expertise in public health management, praised the petitioner’s “innovative approach to disaster mitigation and preparedness in the health care sector.”

The petitioner did not claim to be employed at the time she filed the petition in October 2010. Rather, she stated: “Upon my receipt of permanent resident status I intend to resume my work toward the creation of a national healthcare system.” Regarding her unemployment, she stated:

I resigned from CCSC for personal reasons. However, I am in active discussion with several organizations that are interested in my services. Attached you will find a

letter from [REDACTED] Managing Partner for BlueNovo, which attests to my prospects of employment in the U.S. In his letter [REDACTED] confirms BlueNovo's interest in employing me. . . . Additionally, I am attaching multiple emails from various organizations that have expressed interest in my services.

In his letter, [REDACTED] expressed "BlueNovo's interest in offering prospective employment to [the petitioner] to facilitate quality improvement in the healthcare solutions industry." The letter contains no discussion of the petitioner's existing achievements or impact in her field. Rather, [REDACTED] stated that the petitioner's "expertise in healthcare systems and management, and her prior work in the field of emergency preparedness and disaster relief with the Pan American Health Organization suits BlueNovo's mission. . . . As such, BlueNovo will be pleased to consider [the petitioner's] candidacy for a permanent position" after the petitioner becomes a lawful permanent resident of the United States.

The AAO can find no electronic mail messages in the record that relate to job offers or "interest in [the petitioner's] services." Counsel's exhibit list mentions no such messages. The petitioner's essentially unexplained resignation from her position at SCC with no new position lined up calls into question either her continued commitment to her occupation, or employers' demand for her services, or both.

On April 21, 2011, the director issued a request for evidence, indicating that the petitioner had not established a track record of impact or influence beyond the local clinic where she used to work. In response, counsel states: "Certainly, USCIS would not take the position that disaster preparedness is nationally unimportant, especially in the context of our hospitals," but the record contains no evidence that the petitioner has worked in the field of disaster preparedness since her consulting work for PAHO ended in 2007. USCIS will not hold "that disaster preparedness is nationally unimportant," but USCIS will also not find that approximately thirteen months of experience in that field, several years before the filing date, presumptively entitles the petitioner to permanent immigration benefits and a special exemption from a requirement that normally applies to aliens in the immigrant classification that the petitioner has chosen to seek.

Several new witness letters accompanied the petitioner's response to the request for evidence. Some of these letters simply verified the petitioner's participation in various programs. [REDACTED] confirmed the petitioner's participation in PAHO's Training Program in International Health in 2006, and [REDACTED] verified that "[i]n 2010, [the petitioner] was among 578 Baldrige Examiners who reviewed 83 applications" for Baldrige Awards.

[REDACTED] of Potomac, Maryland, asserted that the petitioner's past work for PAHO and SCC was national in scope, and that:

In both 2009 and 2010, [the petitioner] was selected to be among an elite group of experts to judge health care facilities from all regions of the country as part of the Malcolm Baldrige *[sic]* Award. It is my understanding that [the petitioner] would



have been asked to participate in the examination of facilities for the Malcolm Baldrige Award in 2011. However, the organization could not ask her to serve due to the fact that she is not a U.S. citizen.

did not explain why the petitioner's lack of United States citizenship or permanent resident status did not prevent her from serving as a Baldrige examiner in 2009 and 2010. None of the materials from the Department of Commerce acknowledge that the Department had any knowledge of the petitioner's immigration status when it appointed her in the above years.

echoed several prior witnesses by asserting that the petitioner's impact is evident from her frequent presentations to various groups, but the record does not establish the circumstances under which the petitioner made those presentations, nor does it show to what extent (if any) other public health entities have implemented the petitioner's ideas. It cannot suffice merely to show that the petitioner has made her ideas available to others.

, senior manager for community access, health promotion and education at CASA de Maryland, stated: "Since March 2011, [the petitioner] was contracted by CASA as an independent consultant to develop a comprehensive educational curriculum on breast cancer." letter dates from March 2011, meaning that the petitioner had just started this work at the time of the letter.

, now executive director of the Columbia, Missouri, claims not to know the petitioner although she previously worked at Suburban Hospital in Montgomery County, Maryland. praised the petitioner's "selection to develop a comprehensive [breast cancer] educational curriculum," and discussed the importance of disaster management planning in the context of the recent "tornado that killed scores of Joplin residents and rendered useless a key hospital in that city." News articles about the Joplin tornado and other disasters, such as a flood in Nebraska, do not mention the petitioner or her work. The articles, dating from 2011, instead indicate that some United States hospitals continued to suffer from serious weaknesses in disaster preparation, even several years after the petitioner's purportedly influential work in that field in 2006-2007.

The record does not show that the petitioner had any specific experience or expertise in developing "a comprehensive education curriculum on breast cancer" in October 2010 when she filed the petition. Her later agreement to develop such a curriculum for a flat fee of \$1,500 does not and cannot retroactively show that she was eligible for the waiver as of the filing date. An applicant or petitioner must establish that he or she is eligible for the requested benefit at the time of filing the application or petition. 8 C.F.R. § 103.2(b)(1). USCIS cannot properly approve the petition at a future date after the petitioner or beneficiary becomes eligible under a new set of facts. *See Matter of Katigbak*, 14 I&N Dec. 45, 49 (Reg'l Comm'r 1971). Even then, the petitioner had not previously claimed that the duties of a public health quality improvement manager typically include curriculum development in this manner.

Another new piece of evidence is an October 19, 2010 press release from the American Society for Quality (ASQ), announcing that the petitioner “has completed the requirements to be named an ASQ-Certified Manager of Quality/Organizational Excellence.” This announcement came after the October 7, 2010 filing date. The press release claimed that the petitioner’s ASQ certification is “a significant level of professional recognition,” but also indicated that “more than 170,000 individuals have taken the path to reaching their goal of becoming ASQ-Certified” since 1968, a very substantial number that undermines any serious claim of exclusivity.

The director denied the petition on September 12, 2011, acknowledging the overall importance of the petitioner’s occupation but finding that the petitioner had not established significant impact or influence in her field. On appeal, counsel states “USCIS ignored crucial evidence. . . . The evidence included documentation that [the petitioner’s] protocols have been implemented at facilities throughout this country.” Counsel does not identify this documentation. The petitioner’s original documentation did not identify any facilities outside Montgomery County that have put her work to use (hosting a presentation is not implementation of a protocol), and the petitioner’s response to the request for evidence showed serious deficiencies in hospital disaster preparedness several years after the petitioner ceased working in that field.

Counsel asserts: “The United States Department of Commerce has praised [the petitioner] for her contributions to the national” (*sic*). Counsel refers to the certificate that the petitioner received in appreciation of her efforts as a Baldrige examiner in 2009 and 2010, despite apparently being ineligible to serve in that capacity. The record does not contain the petitioner’s completed application forms, and therefore the AAO cannot determine whether the petitioner provided accurate information about her immigration status on those forms.

Rather than establish the significance of the petitioner’s past work, counsel simply catalogs the petitioner’s past work and declares it to be of national significance. Counsel similarly seems to presume that, if the petitioner spoke at a professional gathering, then the other attendees adopted whatever reforms or recommendations the petitioner offered. The record simply offers no documentary evidence that the petitioner’s “quality improvement strategies . . . have resulted in improved healthcare provision for and access by low-income families in the United States.” The hypothetical potential for emulation by other providers does not imply that such emulation has in fact occurred.

Counsel cites letters from witnesses, most of whom have worked closely with the petitioner in some capacity. The Board of Immigration Appeals (BIA) has held that testimony should not be disregarded simply because it is “self-serving.” *See, e.g., Matter of S-A-*, 22 I&N Dec. 1328, 1332 (BIA 2000) (citing cases). The BIA also held, however: “We not only encourage, but require the introduction of corroborative testimonial and documentary evidence, where available.” *Id.* If testimonial evidence lacks specificity, detail, or credibility, there is a greater need for the petitioner to submit corroborative evidence. *Matter of Y-B-*, 21 I&N Dec. 1136 (BIA 1998).

The opinions of experts in the field are not without weight and have received consideration above. USCIS may, in its discretion, use as advisory opinions statements submitted as expert testimony. *See Matter of Caron International*, 19 I&N Dec. 791, 795 (Comm'r 1988). However, USCIS is ultimately responsible for making the final determination regarding an alien's eligibility for the benefit sought. *Id.* The submission of letters from experts supporting the petition is not presumptive evidence of eligibility; USCIS may, as above, evaluate the content of those letters as to whether they support the alien's eligibility. *See id.* at 795; *see also Matter of V-K-*, 24 I&N Dec. 500, 502 n.2 (BIA 2008) (noting that expert opinion testimony does not purport to be evidence as to "fact"). USCIS may even give less weight to an opinion that is not corroborated, in accord with other information or is in any way questionable. *Id.* at 795; *see also Matter of Soffici*, 22 I&N Dec. 158, 165 (Comm'r 1998) (citing *Matter of Treasure Craft of California*, 14 I&N Dec. 190 (Reg'l Comm'r 1972)).

Several witnesses have offered claims of fact rather than opinion, and these claimed facts (such as wider implementation of "best practices" proposed by the petitioner) are all amenable to documentary verification that the record simply lacks. The petitioner has produced, for example, no documentation from other health clinics to show implementation of policies derived from the petitioner's work, and no statistical evidence to show improvement of patient care resulting from that implementation. Simply showing that the petitioner has been effective at her job cannot suffice to establish eligibility for the waiver, because such eligibility rests on more than mere competence, or even exceptional ability.

For the reasons discussed above, the petitioner has not shown that a waiver of the statutory job offer requirement would be in the national interest of the United States. Review of the record reveals another ground for denial of the petition.

The AAO may deny an application or petition that fails to comply with the technical requirements of the law even if the Service Center does not identify all of the grounds for denial in the initial decision. *See Spencer Enterprises, Inc. v. United States*, 229 F. Supp. 2d 1025, 1043 (E.D. Cal. 2001), *aff'd*, 345 F.3d 683 (9<sup>th</sup> Cir. 2003); *see also Soltane v. DOJ*, 381 F.3d 143, 145 (3d Cir. 2004) (noting that the AAO conducts appellate review on a *de novo* basis).

In order for the petitioner to qualify for classification as a member of the professions holding an advanced degree, the USCIS regulation at 8 C.F.R. § 204.5(k)(3)(i)(A) requires the petitioner to submit an official academic record showing that the alien has an United States advanced degree or a foreign equivalent degree.

The petitioner submitted translated copies of two diplomas from universities in Argentina. The translation of a 2003 diploma from Favoloro University refers to a "Masters in Systems and Health Services Management." The translation of a 1997 diploma from the National University of Cordoba reads, in part: "The Bachelor's degree in Business Administration / **Masters in Systems and Health Services Management**" (emphasis in original). Although the translator certified the translations as

accurate, the translation of the 1997 diploma appears to be in error, mistakenly including language from the 2003 diploma.

The petitioner did not submit any evidence (such as a credential evaluation) to show that her foreign degree is equivalent to a United States advanced degree. Absent evidence to show that the petitioner's foreign degree is equivalent to a United States advanced degree, the petitioner has not met her burden of proof. This omission is a further ground for denial of the petition.

As is clear from a plain reading of the statute, it was not the intent of Congress that every person qualified to engage in a profession in the United States should be exempt from the requirement of a job offer based on national interest. Likewise, it does not appear to have been the intent of Congress to grant national interest waivers on the basis of the overall importance of a given profession, rather than on the merits of the individual alien. On the basis of the evidence submitted, the petitioner has not established that a waiver of the requirement of an approved labor certification will be in the national interest of the United States.

The AAO will dismiss the appeal for the above stated reasons, with each considered as an independent and alternative basis for dismissal. In visa petition proceedings, the burden of proving eligibility for the benefit sought remains entirely with the petitioner. Section 291 of the Act, 8 U.S.C. § 1361. Here, the petitioner has not met that burden.

**ORDER:** The appeal is dismissed.